## UNITED STATES BANKRUPTCY COURT

| _                                                                                                                                                                                                                                                                                                           | DISTRIC                                               | T OF Delaware                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| In Re. FTX Digital Holdings (Singap                                                                                                                                                                                                                                                                         | §                                                     | Case No. 22-11118                                                                                  |
| Debtor(s)                                                                                                                                                                                                                                                                                                   |                                                       | Lead Case No. <u>22-11068</u>                                                                      |
|                                                                                                                                                                                                                                                                                                             |                                                       |                                                                                                    |
| <b>Monthly Operating Repor</b>                                                                                                                                                                                                                                                                              | t                                                     | Chapter 11                                                                                         |
| Reporting Period Ended: 12/31/2024                                                                                                                                                                                                                                                                          |                                                       | Petition Date: 11/11/2022                                                                          |
| Months Pending: 26                                                                                                                                                                                                                                                                                          |                                                       | Industry Classification: 5 2 3 9                                                                   |
| Reporting Method:                                                                                                                                                                                                                                                                                           | Accrual Basis                                         | Cash Basis                                                                                         |
| Debtor's Full-Time Employees (current):                                                                                                                                                                                                                                                                     |                                                       | 0                                                                                                  |
| Debtor's Full-Time Employees (as of dat                                                                                                                                                                                                                                                                     | e of order for relief):                               | 5                                                                                                  |
| Statement of cash receipts and displayed Balance sheet containing the sun Statement of operations (profit of Accounts receivable aging Postpetition liabilities aging Statement of capital assets Schedule of payments to profess Schedule of payments to insiders All bank statements and bank receivable. | nmary and detail of the asser loss statement)  ionals | ets, liabilities and equity (net worth) or deficit                                                 |
| Description of the assets sold or /s/ Kimberly A. Brown Signature of Responsible Party 01/21/2025 Date                                                                                                                                                                                                      |                                                       | Kimberly A. Brown Printed Name of Responsible Party  919 Market Street, Suite 1800, P.O. Box 2087, |
|                                                                                                                                                                                                                                                                                                             |                                                       | Wilmington, DE 19899<br>Address                                                                    |

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R.  $\S$  1320.4(a)(2) applies.

| Part 1 | : Cash Receipts and Disbursements                                                                          | <b>Current Month</b> | Cumulative |
|--------|------------------------------------------------------------------------------------------------------------|----------------------|------------|
| a. Ca  | ash balance beginning of month                                                                             | \$244,999            |            |
| b. To  | otal receipts (net of transfers between accounts)                                                          | \$0                  | \$12,324   |
| c. To  | otal disbursements (net of transfers between accounts)                                                     | \$2,953              | \$132,999  |
| d. Ca  | ash balance end of month (a+b-c)                                                                           | \$242,046            |            |
| e. Di  | sbursements made by third party for the benefit of the estate                                              | \$0                  | \$0        |
| f. To  | otal disbursements for quarterly fee calculation (c+e)                                                     | \$2,953              | \$132,999  |
|        | : Asset and Liability Status enerally applicable to Individual Debtors. See Instructions.)                 | <b>Current Month</b> |            |
|        | ecounts receivable (total net of allowance)                                                                | \$259,815            |            |
|        | ecounts receivable over 90 days outstanding (net of allowance)                                             | \$0                  |            |
|        | ventory (Book • Market Other (attach explanation))                                                         | \$0                  |            |
|        | tal current assets                                                                                         | \$513,007            |            |
|        | tal assets                                                                                                 | \$609,483            |            |
|        | stpetition payables (excluding taxes)                                                                      | \$171,778            |            |
|        | stpetition payables (excluding taxes) stpetition payables past due (excluding taxes)                       | \$0                  |            |
|        | stpetition taxes payable                                                                                   | \$0                  |            |
|        | stpetition taxes payable stpetition taxes past due                                                         | \$0                  |            |
|        | tal postpetition debt (f+h)                                                                                | <u> </u>             |            |
|        |                                                                                                            | \$171,778            |            |
|        | epetition secured debt                                                                                     | \$0                  |            |
|        | epetition priority debt                                                                                    | \$0                  |            |
|        | epetition unsecured debt                                                                                   | \$911,004            |            |
|        | tal liabilities (debt) (j+k+l+m)                                                                           | \$1,082,782          |            |
| o. En  | ding equity/net worth (e-n)                                                                                | \$-473,299           |            |
| Part 3 | : Assets Sold or Transferred                                                                               | <b>Current Month</b> | Cumulative |
|        | otal cash sales price for assets sold/transferred outside the ordinary                                     | ¢o.                  | <b>\$0</b> |
|        | urse of business otal payments to third parties incident to assets being sold/transferred                  | \$0                  | \$0        |
|        | tside the ordinary course of business                                                                      | \$0                  | \$0        |
|        | et cash proceeds from assets sold/transferred outside the ordinary<br>urse of business (a-b)               | \$0                  | \$0        |
|        |                                                                                                            |                      |            |
|        | : Income Statement (Statement of Operations) enerally applicable to Individual Debtors. See Instructions.) | Current Month        | Cumulative |
| a. G   | ross income/sales (net of returns and allowances)                                                          | \$0                  |            |
| b. Co  | ost of goods sold (inclusive of depreciation, if applicable)                                               | \$0                  |            |
| c. G   | ross profit (a-b)                                                                                          | \$0                  |            |
| d. Se  | lling expenses                                                                                             | \$0                  |            |
| e. Go  | eneral and administrative expenses                                                                         | \$31,775             |            |
| f. O   | her expenses                                                                                               | \$0                  |            |
| g. Do  | epreciation and/or amortization (not included in 4b)                                                       | \$0                  |            |
|        | terest                                                                                                     | \$0                  |            |
|        | exes (local, state, and federal)                                                                           | \$0                  |            |
|        | eorganization items                                                                                        | \$0                  | *          |
| k. Pr  | ofit (loss)                                                                                                | \$-31,775            | \$-165,360 |

| Part 5: | Profe   | ssional Fees and Expenses             |                         |                           |                     |                       |                    |
|---------|---------|---------------------------------------|-------------------------|---------------------------|---------------------|-----------------------|--------------------|
|         |         |                                       |                         | Approved<br>Current Month | Approved Cumulative | Paid Current<br>Month | Paid<br>Cumulative |
| a.      | Debtor  | 's professional fees & expenses (bank | ruptcy) Aggregate Total |                           |                     |                       |                    |
|         | Itemize | ed Breakdown by Firm                  |                         |                           |                     |                       |                    |
|         |         | Firm Name                             | Role                    |                           |                     |                       |                    |
|         | i       |                                       |                         |                           |                     |                       |                    |
|         | ii      |                                       |                         |                           |                     |                       |                    |
|         | iii     |                                       |                         |                           |                     |                       |                    |
|         | iv      |                                       |                         |                           |                     |                       |                    |
|         | v       |                                       |                         |                           |                     |                       |                    |
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Debtor's Name FTX Digital Holdings (Singapore) Pte Ltd

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|    |        |                               |                                      | Approved<br>Current Month | Approved Cumulative | Paid Current<br>Month | Paid<br>Cumulative |
|----|--------|-------------------------------|--------------------------------------|---------------------------|---------------------|-----------------------|--------------------|
| b. | Debto  | or's professional fees & expe | nses (nonbankruptcy) Aggregate Total |                           |                     |                       |                    |
|    | Itemiz | zed Breakdown by Firm         |                                      |                           |                     |                       |                    |
|    |        | Firm Name                     | Role                                 |                           |                     |                       |                    |
|    | i      |                               |                                      |                           |                     |                       |                    |
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Debtor's Name FTX Digital Holdings (Singapore) Pte Ltd

|    |                                                             | xcix |  |     |     |     |     |  |
|----|-------------------------------------------------------------|------|--|-----|-----|-----|-----|--|
|    |                                                             | c    |  |     |     |     |     |  |
| c. | c. All professional fees and expenses (debtor & committees) |      |  | \$0 | \$0 | \$0 | \$0 |  |

| Pa | rt 6: Postpetition Taxes                                                                                          | Curre | ent Month       | Cumulative               |
|----|-------------------------------------------------------------------------------------------------------------------|-------|-----------------|--------------------------|
| a. | Postpetition income taxes accrued (local, state, and federal)                                                     |       | \$0             | \$0                      |
| b. | Postpetition income taxes paid (local, state, and federal)                                                        | -     | \$0             | \$0                      |
| c. | Postpetition employer payroll taxes accrued                                                                       |       | \$0             | \$0                      |
| d. | Postpetition employer payroll taxes paid                                                                          |       | \$0             | \$0                      |
| e. | Postpetition property taxes paid                                                                                  |       | \$0             | \$0                      |
| f. | Postpetition other taxes accrued (local, state, and federal)                                                      |       | \$0             | \$0                      |
| g. | Postpetition other taxes paid (local, state, and federal)                                                         |       | \$0             | \$0                      |
| Pa | rt 7: Questionnaire - During this reporting period:                                                               |       |                 |                          |
| a. | Were any payments made on prepetition debt? (if yes, see Instructions)                                            | Yes 🔿 | No 💿            |                          |
| b. | Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) | Yes 🔿 | No 💿            |                          |
| c. | Were any payments made to or on behalf of insiders?                                                               | Yes 🔿 | No 💿            |                          |
| d. | Are you current on postpetition tax return filings?                                                               | Yes • | No 🔘            |                          |
| e. | Are you current on postpetition estimated tax payments?                                                           | Yes • | No 🔘            |                          |
| f. | Were all trust fund taxes remitted on a current basis?                                                            | Yes • | No 🔘            |                          |
| g. | Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions)                         | Yes 🔿 | No 💿            |                          |
| h. | Were all payments made to or on behalf of professionals approved by the court?                                    | Yes 🔿 | No O N/A •      |                          |
| i. | Do you have: Worker's compensation insurance?                                                                     | Yes 🔿 | No 💿            |                          |
|    | If yes, are your premiums current?                                                                                | Yes 🔿 | No () N/A (•) ( | if no, see Instructions) |
|    | Casualty/property insurance?                                                                                      | Yes • | No 🔘            |                          |
|    | If yes, are your premiums current?                                                                                | Yes • | No O N/A O      | if no, see Instructions) |
|    | General liability insurance?                                                                                      | Yes 💿 | No 🔿            |                          |
|    | If yes, are your premiums current?                                                                                | Yes • | No () N/A () (  | if no, see Instructions) |
| j. | Has a plan of reorganization been filed with the court?                                                           | Yes • | No 🔘            |                          |
| k. | Has a disclosure statement been filed with the court?                                                             | Yes 💿 | No 🔘            |                          |
| 1. | Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?                             | Yes • | No 🔿            |                          |

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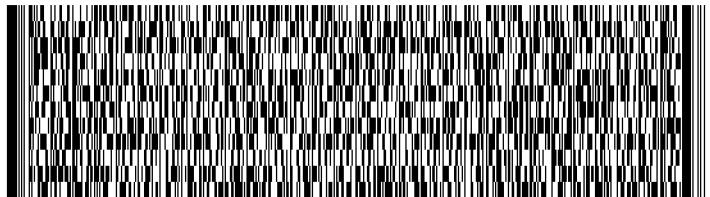
Debtor's Name FTX Digital Holdings (Singapore) Pte Ltd

Case No. 22-11118

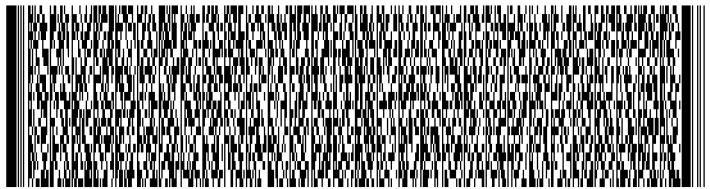
| Par                                                                                                                                                                                                               | rt 8: Individual Chapter 11 Debtors (Only)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                             |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--|--|--|--|--|
| a.                                                                                                                                                                                                                | Gross income (receipts) from salary and wages                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$0                         |  |  |  |  |  |
| b.                                                                                                                                                                                                                | Gross income (receipts) from self-employment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <del></del>                 |  |  |  |  |  |
| c.                                                                                                                                                                                                                | Gross income from all other sources                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <del></del>                 |  |  |  |  |  |
| d.                                                                                                                                                                                                                | Total income in the reporting period (a+b+c)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$0                         |  |  |  |  |  |
| e.                                                                                                                                                                                                                | Payroll deductions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <del></del>                 |  |  |  |  |  |
| f.                                                                                                                                                                                                                | Self-employment related expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del></del>                 |  |  |  |  |  |
| g.                                                                                                                                                                                                                | Living expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <del></del>                 |  |  |  |  |  |
| h.                                                                                                                                                                                                                | All other expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <del></del>                 |  |  |  |  |  |
| i.                                                                                                                                                                                                                | Total expenses in the reporting period (e+f+g+h)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$0                         |  |  |  |  |  |
| j.                                                                                                                                                                                                                | Difference between total income and total expenses (d-i)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$0                         |  |  |  |  |  |
| k.                                                                                                                                                                                                                | List the total amount of all postpetition debts that are past due                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | \$0                         |  |  |  |  |  |
| 1.                                                                                                                                                                                                                | Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Yes O No •                  |  |  |  |  |  |
| m.                                                                                                                                                                                                                | If yes, have you made all Domestic Support Obligation payments?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Yes O No N/A •              |  |  |  |  |  |
| thr<br>bei<br>is i<br>lav<br>ma<br>Ex<br>Re<br>wv                                                                                                                                                                 | 28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." <i>See</i> 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F). |                             |  |  |  |  |  |
| I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |  |  |  |  |  |
| /s/                                                                                                                                                                                                               | Mary Cilia Mary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | y Cilia                     |  |  |  |  |  |
| Sign                                                                                                                                                                                                              | nature of Responsible Party Printe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | d Name of Responsible Party |  |  |  |  |  |
| Ch                                                                                                                                                                                                                | ief Financial Officer 01/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1/2025                      |  |  |  |  |  |

Date

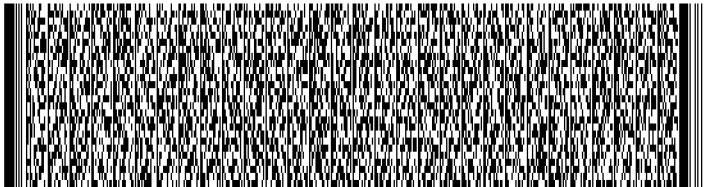
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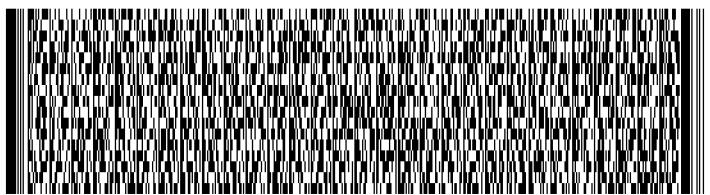
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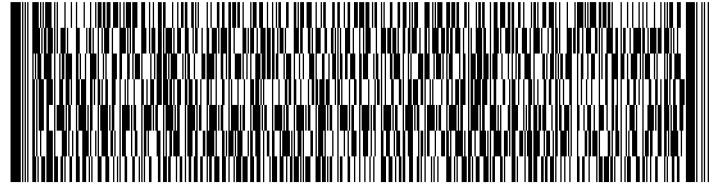
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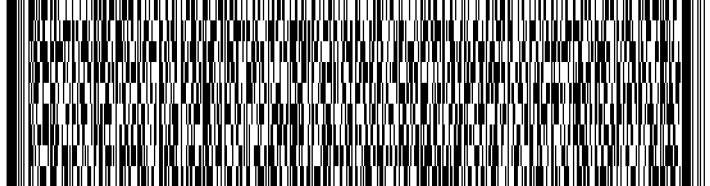
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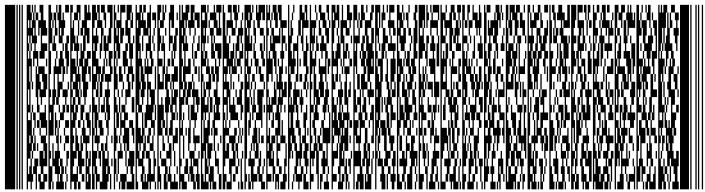
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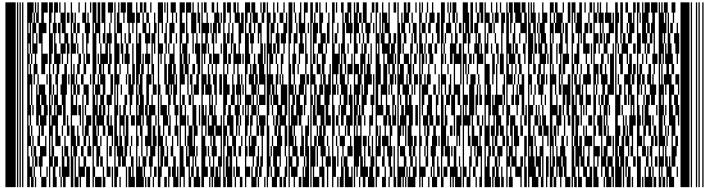
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NonBankruptcy51to100



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